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# TRANSMITTAL FORM

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(To be used for all correspondence after initial filing)



Total Number of Pages in This Submission

18

Application Number	08/653,294
Filing Date	May 24, 1996
First Named Inventor	Carol A. CLAYBERGER
Group Art Unit	1644
Examiner Name	M. Dibrino

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm  
or  
Individual NameMORRISON & FOERSTER LLP  
Laurie L. Hill - 51,804

Signature

Date

May 30, 2003

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: 5/30/03

Signature:

(Ruth Saskowski)

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# FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

JUN 02 2003

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 410.00)

## METHOD OF PAYMENT (check all that apply)

 Check  Credit Card  Money Order  Other  None
 Deposit Account

Deposit Account Number 03-1952

Deposit Account Name Morrison &amp; Foerster LLP

The Commissioner is hereby authorized to: (check all that apply)

- Charge fee(s) indicated below  Credit any overpayments  
 Charge any additional fee(s) during the pendency of this application  
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	750	2001	375	Utility filing fee	
1002	330	2002	165	Design filing fee	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1) (\$ 0.00)

## 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

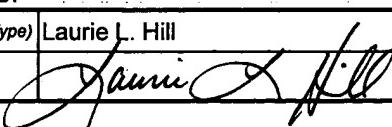
Total Claims	-** =	Extra Claims	Fee from below	Fee Paid
Independent Claims	-** =			
Multiple Dependent	-** =			

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	84	2201	42	Independent claims in excess of 3
1203	280	2203	140	Multiple dependent claim, if not paid
1204	84	2204	42	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 0.00)

\*\*or number previously paid, if greater; For Reissues, see above

SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	Laurie L. Hill	Registration No. (Attorney/Agent)	51,804	Telephone (858) 720-5100
Signature		Date	May 30, 2003	

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Dated: 5/30/03 Signature: 

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Signature:

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Docket No.: 286002020023

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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:  
Carol A. CLAYBERGER, et al

Application No.: 08/653,294

Group Art Unit: 1644

Filed: May 24, 1996

Examiner: M. DiBrino

For: IMMUNOMODULATING DIMERS

### AMENDMENT UNDER 37 CFR 1.116

*Please  
LMB/BS/MS*  
**Box AF**  
Commissioner for Patents  
Washington, DC 20231

Dear Sir:

This is in response to the Final Action dated December 30, 2002, for which a response was due on March 30, 2002, and for which a two month extension of time is requested to extend the time for response from March 30, 2003 to May 30, 2003. Careful consideration has been given to the grounds for rejection as contained in the Office Action, and the enclosed discussion is offered in response. Reconsideration is respectfully requested. Also included herein is Exhibit A "A Clean Copy of the Claims."